

**For Parents**

American Diabetes Association.



**More Wit and Wisdom for kids with diabetes  
(and their parents)**

## **Diabetes in Infants & Toddlers**

There's nothing quite like caring for a baby to test the limits of a parent's emotions. Love that knows no bounds. Pride that can be matched only by that of a grandparent. Contentment in rocking chairs at bedtime. Worry that comes with every dream for the future. And fear that seizes a parent when he or she can't figure out why the baby's crying. Or screaming. Or vomiting. Or silent.

It's often difficult to figure out if this little one is upset because of a wet diaper. Or hunger pangs. Or a fever. Or new teeth. Or a just a need for immediate attention from mom or dad. Maybe all the above.

For parents of babies who have been diagnosed with diabetes, this "mind reading" takes on new importance. It creates new anxieties and fears because the list of possible offenses gets longer. Now it could be a wet diaper or hypoglycemia. Hunger pangs or dehydration. Or a need for attention because of dangerously high blood sugars.

### **Not my Baby!**

Remember how you gasped when the doctor told you your baby has diabetes? That gasp was the outward expression of your inner feelings. First disbelief and denial. "It can't be true!. My baby doesn't have diabetes." Then anger and blaming.

"Why me? It must be inherited from my grandmother." These feelings are part of grieving. Grieving that you and your baby and your family will never be the same.

Moving through grief takes time. It's important that you and other family members talk about the changes and how you will handle them. Take time to listen and support each other as you come to accept this new reality and create a new family life.

Remind each other -- and yourself -- no one is to blame. Diabetes is not fair. But, it's no one's fault. No one knows for sure why babies get diabetes. We just know it happens. And we know that babies continue to develop normally and become healthy kids who just happen to have diabetes.

Support outside the family is also important. Find someone whom you can talk to about your feelings, the necessary changes, your fears, and frustrations. Then make them sit through your success stories, too. Try a friend. A minister. Other parents who have kids with diabetes. A counselor. Just find someone. Call your local American Diabetes Association office to find out about support groups or other programs near you.

## Surviving with Diabetes

There is a universal reaction seen in parents after the diagnosis of diabetes in their child. They are overwhelmed and anxious about their ability to deal effectively with this disease and care for their baby. It's universal. That means you are not the only one feeling like this.

It's important to realize you do not have to learn everything about diabetes this very minute. In fact, there are many things you won't need to know for years. Right now it's important to focus on the basics, on survival skills. You need to learn the general treatment plan for your baby or toddler, the treatment goals and how to achieve them, and the immediate skills you need to treat the diabetes.

Your baby's health care team will give you specific information about glucose monitoring, injections, simple dose adjustments, treating hypoglycemia (low blood sugar), feeding, and more. More than you think you will ever be able to remember.

Learning this basic information and mastering necessary skills to take care of your baby will reduce your anxiety level. This will be good for your own mental and physical health as well as for your baby's well-being. And remember, your mental and physical health is important for the well-being of your baby.

When you are not feeling so anxious, learning will come much easier so you will be able to absorb more information. And remember, if you forget what you've learned or have questions, help is as close as a phone call to your health care team or the American Diabetes Association at 1-800-DIABETES (342-2383).

## The Truth about Checking and Injecting

Monitoring blood sugar levels and managing your baby's diabetes will help make sure your child grows up healthy and normal. For this to happen, parents must learn to do blood checks and give insulin. These two crucial skills are the same two that tend to cause high levels of stress in parents.

This is one time the line "This is gonna hurt me more than it does you" is probably true. Pin pricks and needle sticks are not pleasant. Pain is the body's way of avoiding harm. But once your child's body begins to "know" blood checks and injections cause no harm, not only will it be less sensitive but so will you.

Your baby's health care team will teach you techniques and schedules for checking your baby's blood and giving injections. They will demonstrate these skills, help you master them, and hand you a tissue for those nervous tears.

The doctor will set a target range for blood sugars that is specific to your baby. This is often a bit higher than for older children and adults. This helps avoid insulin reactions (hypoglycemia or low blood sugar) and makes sure there's enough sugar available in the child's system for proper brain development.

Here's a list of tips from other parents who have "been there."

- ★ Avoid "sneak attacks" to do shots and finger or heel pokes. Babies may begin to get scared and flinch every time you pick them up for a cuddle. It might help to talk them through it in a calm, soothing voice.
- ★ Try distracting the baby at the critical moment or have someone

else do it. Patting or squeezing another part of the body works well. Or offering a favorite toy.

- ★ Set up a diabetes care station where you keep the supplies and do blood checks and injections. Avoid doing these things in the child's bed. Keep the bed a "safe" comforting place.
- ★ Have supplies ready beforehand to help minimize stress for both of you.
- ★ Use plastic pipettes to transfer blood from heel or finger to the test strip. This cuts down both on having to control a squirming baby and on wasting strips.
- ★ Purchase a meter that requires a small blood sample. And after you're done checking be sure to write down the results. Share them with your team. It's a great way for you and them to make adjustments in eating or insulin that can make life easier for your baby and you.
- ★ Let toddlers choose which finger to stick, pick out a lancet, or take the test strip from the vial.
- ★ To make shot times for toddlers more peaceful, let him or her choose between two places for the shot or wipe off the spot with a swab.
- ★ On a large piece of paper, draw the outline of your toddler's body. After each injection let her or him place a star on the outline where the injection was given. Besides providing a positive reinforcement, this will help keep track of injection sites.
- ★ And when you are done, cuddle, cuddle, cuddle.

### **Flex Your Flexibility**

Insulin management in babies is tricky. They don't eat major planned meals like

older children and adults. Schedules for them are often just things to mess up. And if they don't feel like eating, well, don't even think about winning that game.

Your baby's health care team will tell you how many injections are needed each day. Some babies get 2 or 3 shots a day. Others get 4 or more. They will also tell you what type of insulin to use. Different kinds of insulin work on different time schedules. Many children take more than one kind of insulin. It all depends on your child's needs. Be prepared to make adjustments and changes in this routine. The changes in size, activity levels, and diets of babies and toddlers make this necessary.

### **Lows and Highs of Managing Diabetes**

Even with careful insulin management and good eating, your baby will probably become hypoglycemic (have low blood sugar) at times. And, of course, he or she will not be able to tell you about it. Some signs to watch for are:

- ★ A particular cry,
- ★ Becoming pale or cranky,
- ★ Sweating or trembling,
- ★ Developing a bluish tinge to fingers or lips,
- ★ Clumsiness.

These are signs it's time to do a blood check. If you cannot do it right then, treat for hypoglycemia anyway. It's safer than waiting. Brain development requires a constant supply of glucose. Preventing low blood sugars in infants is a high priority. It's vital to treat low blood sugars as quickly and effectively as possible.

To treat hypoglycemia, offer a drink with easily absorbed sugar. Apple juice is a common standby but there may be others your baby likes better. It probably won't take much. The carbohydrates it takes to raise the blood sugar level go much farther in a small body than they would in yours. Your health care team will give you specific suggestions on treating low blood sugars. They will also give you instructions on glucagon which is the treatment needed when blood sugars are dangerously low and immediate action is necessary.

On the other end of the scale is hyperglycemia or high blood sugars. This happens when the amount of insulin doesn't fit the amount of food your baby eats. Symptoms of high blood sugars are:

- ★ Excessive thirst,
- ★ Frequent urination,
- ★ Fatigue.

Treatment will require adjustments in insulin levels. If you see any of these symptoms in your baby, talk to your doctor right away.

The danger for your baby in having untreated, high blood sugars is the possibility of developing ketoacidosis. This is a very serious condition caused by high levels of ketones in the blood and urine. Ketones are waste products that build up when the body burns fat for energy. Check with your baby's health care team about when and how to do ketone tests, especially when your child is sick. Call the doctor immediately if testing shows evidence of ketones. Unless treated immediately, ketoacidosis can lead to a diabetic coma.

**"I can do it myself!"**

As your baby becomes a toddler, he or she enters the age of self-feeding. You may notice a reduction in appetite and will certainly witness a spurt of independent thinking when it comes to choosing foods to eat. One way to keep peace at mealtime is to have plenty of acceptable choices available. Choices that you know your toddler enjoys and that meet the current demands of diabetes management.

While babies are pretty much on their own schedule for eating, toddlers begin joining the rest of the family in a regular schedule of meals and snacks. When your main concern is getting enough food into your child to cover insulin, offer some different choices or bigger portions of things you know he or she enjoys. On the other hand, when your toddler has eaten the whole meal and is wanting more, offer choices with less blood sugar impact, such as proteins, fats, and low-carbohydrate vegetables.

As with all children, it's important to avoid making sweets and other foods into rewards. To reward your toddler for good behavior or some accomplishment, use nonfood items. Things that have no affect on blood sugars.

- ★ Stickers,
- ★ Small toys,
- ★ Hand stamps,
- ★ Hugs and kisses,
- ★ Alone time with someone special,
- ★ Praise.

By avoiding the creation of a strong connection in his or her mind between food and rewards, diabetes and weight management will be easier throughout your child's life.

## You Can Do It

Diabetes is a choice no parent would make for their child. But unfortunately, it is not our choice to make. You can choose to fight it, though. You can choose to give yourself the knowledge, the patience, and the flexibility to help your child manage this disease. And to help him or her grow up with every opportunity to participate and succeed in childhood activities. (In fact, many adults who were diagnosed with diabetes as a baby or toddler believe they had it easy -- because they never had to "unlearn" eating habits, and testing and injections were always just a part of normal life!).

- ★ Develop a family philosophy or strategy toward living with diabetes. Your family didn't choose diabetes but you can choose how you'll live with it.
- ★ Managing diabetes is a lifelong job. One that will go better some days than others. Don't expect to be perfect.

Finally, remember you're not in this alone. For starters, there's your child. Include her or him in your management goal from day one. Be prepared to hand over some of the responsibilities you now have to take care of.

And understand that no matter what time of day or night, no matter if things are going well for you and your child or are completely out of whack, some parent and some kid somewhere are going through the exact same thing. Ask your American Diabetes Association for a listing of support groups for parents of



children with diabetes. Get online to learn and share. A good place to start is the American Diabetes home page at [www.diabetes.org](http://www.diabetes.org) or by calling us at 800.DIABETES (342.2383).

The hurt of diabetes is every bit as emotional as it is physical. But you can fight through it. The child you have now is exactly the same as before the diagnosis. He or she is a normal kid who happens to have diabetes. And you are the mom or dad of a child that may sometimes cause you worry, but will always be loved.

## To Learn More

- ★ **Wizdom:** If you don't already have it, download your free copy of the *Wizdom* parents' book. Log on to [diabetes.org/wizdom/download.asp](http://diabetes.org/wizdom/download.asp)
- ★ **Diabetes Forecast** is a monthly magazine published by the American Diabetes Association for people with diabetes and their families. Subscribe by calling us at 1-800-806-7801.
- ★ *The Dinosaur Tamer* is a book of stories for children with diabetes. Purchase your copy at [store.diabetes.org](http://store.diabetes.org).
- ★ This piece is one in a series. We have titles about parents' issues, diabetes and school, and more. Call us at 1-800-DIABETES (800-342-2383) or download them at [diabetes.org/wizdom/pod.asp](http://diabetes.org/wizdom/pod.asp)
- ★ For more advice and answers, log on to our Parents' Place Community Forum at [diabetes.org](http://diabetes.org). Click on "**Community and Resources**," then "**Community Forums**."
- ★ Questions or comments? E-mail us at [wizdom@diabetes.org](mailto:wizdom@diabetes.org)